

EXPRESS MAIL MAILING LABEL NO. EV719222290US

FEE TRANSMITTAL
FY 2007

JAN 29 2007

Complete if Known	
Application No.	09/942,078
Docket No.	AIG-004 (10251/047)
Filing Date	August 28, 2001
First Named Inventor	Harrell
Group No.	3626
Examiner Name	Vanel Frenel
Confirmation No.	6164

METHOD OF PAYMENT

FEE CALCULATION (continued)

Payment Enclosed:

 Check Money Order Other

4. ADDITIONAL FEES

Large Entity	Small Entity	Fee Description	Fee Paid
	130	Surcharge - late filing fee or oath	
	50	Surcharge - late provisional filing fee or cover sheet	
	130	Non-English specification	
2,520	2,520	Request for ex parte re-examination	
	120	Extension for reply within 1 st mo.	
	450	Extension for reply within 2 nd mo.	
1,020	510	Extension for reply within 3 rd mo.	1,020.00
	1,590	Extension for reply within 4 th mo.	
2,160	1,080	Extension for reply within 5 th mo.	
	500	Notice of Appeal	
	500	Filing a brief in support of an appeal	
1,000	500	Request for oral hearing	
	400	Petitions to the Director	
	180	Submission of IDS	
790	395	Filing a submission after final rejection (37 CFR 1.129(a))	
	790	For each additional invention to be examined (37 CFR 1.129(b))	
	100	Certificate of Correction for applicant's error	
	130	Submission of Terminal Disclaimer	
		01/31/2007 WASFAW1 00000003 09942078	
Other fee (Specify)	01 FC:1253	1020.00 DA	
Other fee (Specify)			4. TOTAL: 1,020.00

The Commissioner is hereby authorized to credit or charge any fee indicated below for this submission to Deposit Account No. 50-3081.

- Required Fees (copy of this sheet enclosed).
- Additional fee required under 37 CFR 1.16 and 1.17.
- Overpayment Credit.

Applicant claims small entity status. (deduct 50%)

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	Filing	Search	Examination	Fee Paid
Utility	300	500	200	
Design	200	100	130	
Plant	200	300	160	
Reissue	300	500	600	
Provisional	200	0	0	

Small Entity Discount

1. TOTAL 0

2. EXCESS CLAIM FEES

	Fee	Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent	50	25
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent.	200	100
Total Claims	Extra Claims	Fee Paid (\$)
- 20 or HP=	x \$ =	

HP = highest number of total claims paid for, if greater than 20

Indep. Claims Extra Claims Fee Paid (\$)

- 3 or HP= x \$ =

HP = highest number of total claims paid for, if greater than 3

Multiple Dependent Claims	Fee(\$)	Small Entity fee (\$)	Fee Paid (\$)
	360	180	

2. TOTAL: 0

3. APPLICATION SIZE FEE

If the specification and drawing exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Additional 50 or fraction thereof	Fee (\$)	Fee Paid
-100= 0	/50=	round up to a whole number	x =	0.00
				3. TOTAL: 0

CORRESPONDENCE ADDRESS

Direct all correspondence to:

Patent Administrator
Proskauer Rose LLP
One International Place
Boston, MA 02110
Tel. No.: (617) 526-9600
Fax No.: (617) 526-9899

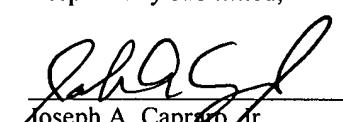
Date: January 29, 2007

Reg. No.: 36,471

Tel. No.: (617) 526-9800

Fax No.: (617) 526-9899

Respectfully submitted,



Joseph A. Capraro, Jr.
Attorney for the Applicants
Proskauer Rose LLP
One International Place
01/31/2007 WASFAW1 00000003 09942078
01 FC:1253 1020.00 DA